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APPLICANTS

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**\*\* CONTINUING DATA \*\*\*\*\*** *VERIFIED 2/14/05*  
 This appln claims benefit of 60/399,809 07/31/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *None 2/14/05*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 10/29/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>Adwance</i> Examiner's Signature Initials	STATE OR COUNTRY PA	SHEETS DRAWING 7	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
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ADDRESS  
 37533  
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TITLE  
 Foot-operated pipette dispenser

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